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Meeting Minutes of:

ILLINOIS DEPARTMENT OF PUBLIC HEALTH - PERINATAL ADVISORY COMMITTEE Maternal Mortality Review Committee (MMRC)

August 8, 2018 9:00 a.m. until 2:00 p.m.

George W. Dunne Building 69 W. Washington	IDPH Offices 535 West Jefferson, 5 th Floor
Chicago, IL	Springfield, IL

Attendees

Members in Attendance	Guests and IDPH
Robin L. Jones	Amanda Bennett, IDPH
Robert Abrams	Chelsea Dade, IDPH intern
Katherine Austman (Phone)	Tanya Dworkin, IDPH
Deborah Boyle	Trishna Harris, IDPH
Stacie Geller	Ashley Horne, IDPH
Abby Koch	Shannon Lightner, IDPH
Olga Lazala	Nancy Martin, IDPH
Kathryn Lindley (Phone)	Miranda Scott, IDPH
Lisa Masinter	Alexander Smith, IDPH
Paula Melone (Phone)	
Brielle Osting	Roma Allen
Beth Plunkett	Daniell Ashford
Donald Reese	Andrea Cross
Barbara Scavone	Jodi Hoskins
Shirley Scott	Christy Levine
Michael Socol	Cindy Mitchell
Patrick Thornton	Members Not In Attendance
Paloma Toledo	Jennifer Banayan (excused)
	Joan Briller (excused)
	Robert Gessner
	Jerome Loew (excused)
	Gary Loy (excused)
	Kevin Madsen
	Frank Nagorka (excused)
	Heather Nixon (excused)
	Lee Smith (excused)

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Introductions

Robin L. Jones called the meeting to order at 9:00 AM and began with introductions.

Motions

- 1. Motion to approve June 2018 minutes

 1st Michael Socol, 2nd Shirley Scott, Unanimous Approval
- 2. Motion to close for maternal death case reviews.

 1st Stacie Geller, 2nd Abby Koch, Unanimous Approval
- 3. Motion to reopen the meeting to the public following case review. 1st Stacie Geller, 2nd Abby Koch, Unanimous Approval.
- 4. Motion to adjourn

 1st Brielle Osting, 2nd Stacie Geller, Unanimous Approval

Minutes

The minutes from the April 2018 meeting were reviewed and approved.

Agenda Items

Illinois Department of Public Health (IDPH) Update

- IDPH discussed the remaining cases for completing group recommendations from case years 2015.
- Discussed the logistics for the October meeting. Both MMRC groups will meet in October and vote on their final recommendations from 2015.
- The group asked if they could start getting information on whether the mom's have private or Medicaid insurance.
- Suggested to possibly collaborate with ILPQC and SQC.

MMRC Mission

- Amanda Bennett gave an update on the MMRC mission
 - o Covered the evaluation form.
 - o Discussed what happens "behind the scenes" at IDPH.
 - o Gave an update on the 2015 deaths and where both committees stand.

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Closed Session

Closed to discuss the maternal death case.

Debrief and Recommendations

Discussion of Recommendations from CY2015

- Discussion on the recommendations that will make the biggest impact.
- Suggested education plans for emergencies departments.
- Discussed home visiting follow-up
- Suggested to include a bucket for "legislation" and a bucket for "quality"
- IDPH asked the group to think about recommendations for hospitals and providers as there are not many current recommendations for those areas.

Patient/Family

- 1. Engage in state wide public education campaign and discharge education to prenatal and postpartum women. Education programs should focus on awareness of the signs and symptoms of cardiomyopathy and cardiac complications during pregnancy, postpartum cardiomyopathy
- 2. every high risk woman meets with social worker prior to discharge from hospital

Facility

- 1. All clinics and emergency rooms should be required to have a sign/prompt at registration desks that asks "have you had a baby in the last 12 months?"
- 2. Develop education plans for education to emergency department and EMS staff and all healthcare providers on the care of pregnant women presenting to the ER + identification of peripartum conditions and potential postpartum complications. IDPH should design initiatives for education to be provided with SQC/ILPQC/Stakeholders (2)]

System

- 1. IDPH should develop a universal health record system that allows for sharing of medical records between hospitals and APC's
- 2. safe healthcare for every woman.org patient safety bundle on reducing postpartum racial disparity; expand Illinois Family Connects statewide
- 3. Establish a new QI entity to manage outpatient initiatives with PNC and primary care providers; address gaps in outpatient care and services available across the state

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- 4. Payers promote connection with primary care and necessary specialists as opposed to accessing all medical care through the Emergency Department, provide patient navigator or case manager to follow up on postpartum visit
- 5. Implementation of perinatal and postpartum checklist for patients' long term care and planning (see healthychoiceshealthyfutures checklist)
- 6. Increase state funding of case management activities
- 7. Reinstitute policies for maternal discharge data collection to local health departments for case management and appropriate follow up

Next Steps

- A small committee will look at the recommendations and will bring it back for larger group to look at.
- The small group will also look at quality and reporting.
- Next meeting is October 10th and will have a vote on the 2015 case year recommendations.

Adjournment

- Motion to adjourn the meeting from Brielle Osting with a second from Stacie Geller with unanimous approval.